



## Contract for Individual Supervision *Addendum: Students, RP (qualifying), CRPO Applicants (general route), Counsellors*

### Goals and Experience

In order to provide the best possible supervision for you during your training / qualification in psychotherapy, it is important to clearly outline and express your goals, concerns, areas of strengths and limitations / potential for growth.

By answering the questions below and honestly as possible you will allow me to support you where and when you need support and to allow you to affirm your own abilities where and when appropriate.

If you can not answer one of the questions below or are not clear on how to answer them, please reach out and ask for clarification.

1. What are your prior experiences with individual supervision (e.g. during your training)?
2. In that, what worked for you (e.g. what form of feedback where you able to understand and best)?
3. What didn't work for you (e.g. what approach left you puzzled or feeling confused)?
4. What would you describe as your strengths in psychotherapy / as a psychotherapist?
5. What would you describe as your limitations in psychotherapy / as a psychotherapist?
6. What is your preferred method of learning (e.g. experiential, auditory, visual, mixed)?

7. What areas of psychotherapeutic practice do you want / need most to develop?
  
  8. What therapeutic tools do you feel most comfortable with?
  
  9. What therapeutic tools do you feel least comfortable with?
  
  10. What is your understanding of Safe and Effective Use of Self — and how do you practice it?
  
  11. Are you in any other supervisory relationship at this time (e.g. at work or in a clinic session)? If so, please describe the form and frequency of supervision?
  
  12. How would you describe your primary goal for supervision with me?
  
  13. What are you most interested in learning in your supervision with me?
  
  14. What are you most worried about in your supervision with me?
  
  15. Are you currently working in
    - private practice
    - a clinic setting
    - a hospital or organizational setting
- 

Date:

Name (please print):

Signature: